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(For instructions on the use of this form see National Archives Manual on the Disposition of Federal Records)			J. I HAGELY ED	JOB N	30B NO.	
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3. MINOR SUBE	DIVISION					
4. NAME OF PE	RSON WITH WHOM TO CONFER	5. TEL. EXT.	•			
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6. CERTIFICATE	OF AGENCY REPRESENTATIVE:		·			
I hereby cer	tify that I am authorized to act for the head of this agency	in matters pertaining t	o the disposal of records, and	that the records	lescribed in this list	
	pages are proposed for disposal for the reason indicated:					
ceased t	cords have b The records will cease to have sufficient to warrant further retention on	the expiration	The records will have control retention in their origin	al form by virtue	of the fact that t	
	of the period of time indicated or tention.	or on the occur-	microphotographic copie the National Archives (s, made in accorda	ance with standards	
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(Date)	(Date) (Signature of Agency Representative)			. (Titie)		
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